## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/541695 APPLICANT(S)

FILING DATE

## **CLAIMS**

	AS FILED		AFTER		AFTER 2 AMENDMENT	
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TOTAL CLAIMS			6			

PTO - 1360 (REV. 11/04)

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51       52         53       54         55       56         57       58         59       60         61       62         63       64         65       66         67       68         69       70         71       72         73       74         75       76         77       78	
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TOTAL CLAIMS	

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